

## RETAIL FOOD ESTABLISHMENT INSPECTION REPORT

State Form 48669 (R2/2-05) SDH Form 51-0001 BLACKFORD CO HEALTH DEPT 506 E. VAN CLEVE HARTFORD CITY, IN 47348 (765) 348-4317

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the parrative portion of this report.

The time limit for correction of each violation is specified in the narrative portion of this report.						
Establishment Name				Telephone Number	Date of In	
MCDONALDS				765 40	(mm/dd/yr)	
Establishment Address (number and street, city, state, ZIP code)				2,0	10/	24/24 2 1
1903 N WACINOT ST. HARTFORD CHY 4-871						
Owner	/ )	10	WALLOUT ST. THE PORD CITY	Purpose:	Follow-1	ip Release Date /
DI MICHERE ENTERORISES &				1. Routine	NO 11/3/24	
Owner's Address				2. Follow-up	Summary of Violations:	
618	NN	10	21 DIANI ST. PORTLAND IN	3. Complaint	/	
Person in Charge						NC P
4. Pre-Operational						_ NC N
5 lemporary						ype (See back of page)
6. HACCP						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Certified Food Handler 7. Other (list) 1 2						V <sub>3</sub> 4 5
FALEY STROUGE						
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC	R	Narrative			To Be Corrected By
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V Chip Comery Area Supervisor Halakhantis						
Received by (signature): Inspected by (signature);						
X Clin Comus 1 / Cellen E45						
cc:						
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